MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

| SERIAL NO. | FILING DATE |
|--------------|-------------|
| 10/567307 | |
| APPL/CANT(S) | |

CLAIMS

| | | | | | | C. | |
|---------------|--|--|----------------|--------------|--------------|-------------|--|
| | AS FILED | | | AFTER | | AFTER | |
| f | | | | NDMENT | 2 MAMENDMENT | | |
| | IND | . DEP. | IND. | DEP. | IND. | DEP. | |
| 2 | +- | | | | ! | , | |
| 3 | | + 7 | | | | | |
| 4 | | + - | | | | | |
| 5 | | 1 | | | | | |
| 6 | 1 | | 1 | | | | |
| 7 | | 1 | | | | - | |
| 8 | | 1 | | | 2 | | |
| 9 | | / | | | | | |
| 10 | | | ļ | | | | |
| 11 · 12 | - | | _ | | | | |
| 13 | | ++- | | | | | |
| 14 | 17 | | | | | | |
| 15 | | 1 | 1 | | | | |
| 16 | | 1 | | | | | |
| 17 | 1 | | | | | | |
| - 18- | | | | | | | |
| 19 20 | | + + | | | | | |
| 21 | | | ! | | | | |
| 22 | | 1 | | | | | |
| 23 | 1 | | | | | | |
| 24 | 1 | 1 | | | | | |
| 25 | | | | | | | |
| 26 | | | | | | | |
| 27 | | | | | | | |
| 28 29 | | | | | | | |
| 30 | | +-; | | | | | |
| 31 | | 1 | | | | | |
| 32 | | 1 | | | | | |
| 33 | | i i | | | | | |
| 34 | | | | | | - | |
| 35 | | | | | | | |
| 36 37 | | ļ | | | | | |
| 38 | | | | | | | |
| 39 | | | | | | | |
| 40 | | | | | | | |
| 41 | | | | | | | |
| 42 | | | | | | | |
| 43 - | | | | | | | |
| 44 | | | | | | | |
| 45 | | | | | | | |
| 46 47 | : | | | | | | |
| 48 | | - | | | | | |
| 49 | | | - | | | —— | |
| 50 | | | - | | - + | | |
| TOTAL | 1- | | | • | | | |
| IND. | φ | , ~ [| | ▼ | | ▼ | |
| TOTAL DEP. | 427 | (| | (- | | ← L | |
| TOTAL | 33 | | R | | É | 70,000 | |
| CLAIMS | <u> </u> | | | 10000 | Š | | |

| 51 52 53 54 55 56 | AS F | DEP. | | TER NDMENT DEP. | | TER INDMENT DEP. |
|----------------------------------|-------------|-------------|----------|-----------------|---------------------------------------|---|
| 52 53 54 55 56 | IND. | | IND. | DEP. | IND. | DED |
| 52 53 54 55 56 | | | | | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 53 54 55 56 | | · | | | | |
| 54 55 56 | | | | | | |
| 55 56 | | 1 | | | <u> </u> | <u> </u> |
| 56 | | | | | | |
| | | | · | | · · · · · · · · · · · · · · · · · · · | ļ |
| 57 | | | | | | |
| 57 58 | | | | | | |
| 59 | | | | | | |
| 60 | | | | | | |
| 61 | | | | · | | |
| 62 | | | | | | <u> </u> |
| 63 | | | | | | |
| 64 | | | | | | |
| 65 | | | | | | |
| 66 | | | | | | |
| 67 | | | | | | |
| - 68 | | | | | | |
| 69 70 | | | | | | - |
| 71 | | | | | | |
| 72 | | | | | | |
| 73 | | | | | | |
| 74 | | | | | | |
| 75 | | | | | | |
| 76 | | | | | | |
| 77 | | | | | | |
| 78 | | | | | | |
| 79 | | | | | | |
| 80 | | | | | | |
| 82 | | | | | | |
| 83 | | | | | | |
| 84 | | | | | | |
| 85 | | | ···· | | | |
| 86 | | | | | | ····· |
| 87 | | | | | | |
| 88 | | | | | | |
| 89 | | [| | | | |
| 90 | | | | | - 10 | |
| 91 | | | | | | |
| 92 | | | | | | |
| 93 | | | | | | |
| 95 | | 1 | - 1 | | - | |
| 96 | | | | | | |
| 97 | | | | | | |
| 98 | | | | | | |
| 99 | | | | | | |
| 100 | | | | | | |
| TOTAL IND. | | # | | + | | # |
| TOTAL DEP. | | + | | (| | (- |
| TOTAL CLAIMS | | | \$ 10 mg | | | |